Canceling Coverage Cancels Care

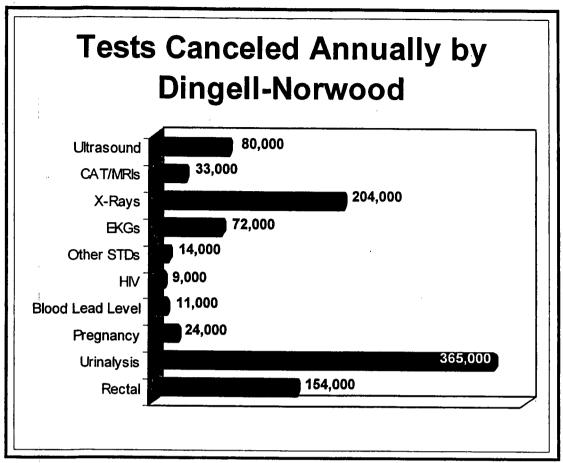
Patients' Rights: The Stakes

Senator Ted Kennedy has suggested the House-Senate patients' rights conference use the House-passed "Bipartisan Consensus Managed Care Improvement Act of 1999" (now part of H.R. 2990) as a model for managed care reform. Also known as "Dingell-Norwood" for its two House sponsors, the bill is heavily regulatory in nature and would devastate over one million Americans by stripping them of their health coverage.

- Dingell-Norwood would cancel coverage for at least 1.2 million Americans. At least two economic forecasting firms arrive at this estimate, based on Congressional Budget Office (CBO) data. This is conservative compared to Employment Policy Foundation estimates indicating Dingell-Norwood could cancel coverage for up to 7 million Americans within five years. (State and federal mandates already have helped increase the number of uninsured by over 10 million since 1988.)
- Those Americans would lose coverage for life-saving medical exams. According to the Centers for Disease Control (CDC), "Health insurance coverage is an important factor associated with use of preventive health care services. Uninsured persons use less preventive health care than do those with insurance[.]" Without coverage, millions of Americans would be forced to forego preventive care that could save their lives.

If the conference follows Senator Kennedy's advice, it will deny families preventive care and leave them with crushing medical bills when disease strikes.

- Dingell-Norwood would cancel coverage for 80,000 ultrasounds, 33,000 CAT Scans and MRIs, 9,000 HIV tests, 204,000 X-rays, 365,000 urinalyses, and 154,000 rectal exams.
- According to the Employee Benefits Research Institute (EBRI), blacks are almost twice as likely as whites to be uninsured. In 1994, the CDC reported the survival rate for blacks with prostate or breast cancer was 15 percentage points lower than for whites, partly because blacks are less likely to receive an early diagnosis. Every year, Dingell-Norwood would eliminate coverage for 231,000 breast exams, 29,000 prostate-specific antigen tests, and 65,000 mammograms. The bill also would cancel coverage for 291,000 pelvic exams and 166,000 pap smears annually. A previous RPC paper erroneously cut each of these estimates in half ("Dingell-Norwood Would Increase Cancer Deaths," 3/2/00). Without coverage, many cancer victims would forego these tests.



Sources: see below.

The same analysis could be applied to S. 1344, the Senate-passed "Patients' Bill of Rights — Plus," whose mandates CBO estimates would be about one-fourth as costly as Dingell-Norwood. However, S. 1344 strikes a delicate balance. The Senate deliberately strove to pair minimum standards for managed care (which could increase the cost of coverage) with reforms designed to make coverage more affordable (such as medical savings accounts, which have a proven record of covering the uninsured). This moderate, commonsense approach makes S. 1344 the only bill that can claim to protect patients without increasing the number of uninsured.

While Dingell-Norwood contains similar affordability provisions, Senator Kennedy, President Clinton, and other proponents want them stripped from the bill. Perhaps that is because they still want a government-run health care system and are comfortable with eroding private health coverage as a means to that end. Conferees who believe in consumer choice should take care not to indulge these devotees of socialized medicine.

[Sources: The CBO estimates Dingell-Norwood would increase premiums an average of 4.1 percent. Both the Barents Group and the Lewin Group indicate this would cause 1.2 million Americans — 0.7 percent of the private market (EBRI) — to lose coverage. Thus, if CDC reports private health insurance pays for 29 million X-rays annually, one may reasonably assume that Dingell-Norwood would cancel coverage for 0.7 percent of that total, or 204,000 X-rays.]

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